

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215507010
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1.) CORPORATION NAME: <b>EL ASADOR RESTAURANT, INC.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>RAUL RIVAS          367 WARRENTON RD STE 110-111          FREDERICKSBURG, VA</b>	DUE DATE: <b>4/30/2015</b>  SCC ID NO: <b>07637077</b>  5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>STAFFORD COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 267 WARRENTON RD STE 110-111  CITY/ST/ZIP: FREDERICKSBURG, VA 22405	
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: RAUL RIVAS TITLE: DIRECTOR ADDRESS: 11809 SWITHBACK LANE CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22407	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MARIA E RIVAS TITLE: DIRECTOR ADDRESS: 11809 SWITHBACK LANE CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22407	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ RAUL RIVAS	RAUL RIVAS, DIRECTOR	2/24/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.